

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

Alaska Democratic Party

ADDRESS (number and street)

2602 Fairbanks St

☐Check if different  
than previously  
reported. (ACC)

Anchorage

AK

99503

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00191247

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☒

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
Post -Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

01

01

2010

through

01

31

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Nanci Jones

Signature of Treasurer

Electronically Filed by Nanci Jones

Date

05

20

2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

A. Form/Schedule : **F3XA**  
Transaction ID :

A \$2800 transfer was mis-reported on 1/29/2010 rather than the actual date of 2/1/2010. Schedule H3 has been corrected.

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name  
Alaska Democratic Party

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <div>2010</div>		160192.70
(b) Cash on Hand at Beginning of Reporting Period .....	160192.70	
(c) Total Receipts (from Line 19) .....	49468.78	49468.78
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	209661.48	209661.48
7. Total Disbursements (from Line 31) .....	26919.13	26919.13
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	182742.35	182742.35
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	10000.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name  
Alaska Democratic Party

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	30000.00	30000.00
(ii) Unitemized .....	10307.00	10307.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	40307.00	40307.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	2000.00	2000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	42307.00	42307.00
12. Transfers From Affiliated/Other Party Committees .....	7026.00	7026.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	107.63	107.63
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	28.15	28.15
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	49468.78	49468.78
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	49468.78	49468.78

## DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	405.76	405.76	
(ii) Non-Federal Share.....	1526.42	1526.42	
(b) Other Federal Operating Expenditures.....	24886.95	24886.95	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	26819.13	26819.13	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	100.00	100.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	100.00	100.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	26919.13	26919.13	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25392.71	25392.71	

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	42307.00	42307.00
34. Total Contribution Refunds (from Line 28(d)) .....	100.00	100.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	42207.00	42207.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	25292.71	25292.71
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	107.63	107.63
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	25185.08	25185.08

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Alaska Democratic Party

**A.**

Full Name (Last, First, Middle Initial)

Catherine M. Allen

Mailing Address 123 W Boston St

City

Seattle

State

WA

Zip Code

98119

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

political consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 0 9 / 2 0 1 0

Transaction ID: 11ai-000023819

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

C. Ebell

Mailing Address 1007 W 3Rd Ave., Ste 201

City

Anchorage

State

AK

Zip Code

99501-1936

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Old Harbor Native Corp

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 0 9 / 2 0 1 0

Transaction ID: 11ai-000023820

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Karen Compton

Mailing Address 1811 Westchester Cir

City

Anchorage

State

AK

Zip Code

99517

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

homemaker, campaign worker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 3 / 2 0 1 0

Transaction ID: 11ai-000023879

Amount of Each Receipt this Period

3000.00

**SUBTOTAL** of Receipts This Page (optional) .....

4000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Alaska Democratic Party

**A.**

Full Name (Last, First, Middle Initial)

Donna Goldsmith

Mailing Address 14120 Jarvi

City

Anchorage

State

AK

Zip Code

99515

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation  
attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 4 / 2 0 1 0

Transaction ID: 11ai-000023906

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

John Letourneau

Mailing Address 14120 Jarvi Dr

City

Anchorage

State

AK

Zip Code

99515

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Thomas Head & Greisen

Occupation  
Accountant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 4 / 2 0 1 0

Transaction ID: 11ai-000023907

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Joan Cahill

Mailing Address 1750 Evergreen Ave

City

Juneau

State

AK

Zip Code

99801

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State of Alaska

Occupation  
Human resource officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 5 / 2 0 1 0

Transaction ID: 11ai-000023836

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional) .....

1300.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Alaska Democratic Party

**A.**

Full Name (Last, First, Middle Initial)

Brenda Knapp

Mailing Address 325 W 9Th St

City

Juneau

State

AK

Zip Code

99801-1635

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 7 / 2 0 1 0

Transaction ID: 11ai-000023843

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

Robert J. David, Jr

Mailing Address PO Box 174

City

Haines

State

AK

Zip Code

99827

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Commerical fisherman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 7 / 2 0 1 0

Transaction ID: 11ai-000023841

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

Robert R. Artwohl

Mailing Address 16358 Far View Pl

City

Anchorage

State

AK

Zip Code

99516

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Surgeon

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 8 / 2 0 1 0

Transaction ID: 11ai-000023881

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Alaska Democratic Party

**A.**

Full Name (Last, First, Middle Initial)

Vincent L. Beltrami

Mailing Address 2051 Steeple Dr.

City

Anchorage

State

AK

Zip Code

99516-2619

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Alaska AFL-CIO

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 8 / 2 0 1 0

Transaction ID: 11ai-000023882

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Ronald Duncan

Mailing Address 9741 Arlene

City

Anchorage

State

AK

Zip Code

99515

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GCI

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 8 / 2 0 1 0

Transaction ID: 11ai-000023883

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Gregory F. Chapados

Mailing Address 1553 A Street #518

City

Anchorage

State

AK

Zip Code

99501

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GCI

Occupation  
Senior VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 8 / 2 0 1 0

Transaction ID: 11ai-000023884

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Alaska Democratic Party

**A.**

Full Name (Last, First, Middle Initial)

Chancy Croft

Mailing Address 2727 McCollie Ave.

City

Anchorage

State

AK

Zip Code

99517-1221

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 8 / 2 0 1 0

Transaction ID: 11ai-000023886

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Walter Featherly

Mailing Address 11430 Trails End Rd.

City

Anchorage

State

AK

Zip Code

99507-6301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Patton Boggs

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 8 / 2 0 1 0

Transaction ID: 11ai-000023888

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Jeff Feldman

Mailing Address 1014 H St.

City

Anchorage

State

AK

Zip Code

99501-3431

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Feldman & Orlansky

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 8 / 2 0 1 0

Transaction ID: 11ai-000023889

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Alaska Democratic Party

**A.**

Full Name (Last, First, Middle Initial)

Raymond A. Gillespie

Mailing Address 1231 W Northern Lts #456

City

Anchorage

State

AK

Zip Code

99503

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation

state lobbyist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 8 / 2 0 1 0

Transaction ID: 11ai-000023890

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Karen Gillis

Mailing Address 5090 W 88th Ave

City

Anchorage

State

AK

Zip Code

99502

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ex. Director

Occupation

Bering Sea Fishermen's Assoc.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 8 / 2 0 1 0

Transaction ID: 11ai-000023892

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

David Gottstein

Mailing Address 733 W 4th Ave #200

City

Anchorage

State

AK

Zip Code

99501

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dynamic Capital

Occupation

Investment Advisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 8 / 2 0 1 0

Transaction ID: 11ai-000023893

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Alaska Democratic Party

**A.**

Full Name (Last, First, Middle Initial)

JIM LEIK

Mailing Address 2236 Susitna Dr.

City

Anchorage

State

AK

Zip Code

99517-1145

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PERKINS COIE ALASKA PC

Occupation  
LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 8 / 2 0 1 0

Transaction ID: 11ai-000023894

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Carl Marrs

Mailing Address 2239 Sorbus Way

City

Anchorage

State

AK

Zip Code

99508

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kodiak Kenai Cable Co

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 8 / 2 0 1 0

Transaction ID: 11ai-000023895

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

David W. Oesting

Mailing Address 7730 Honeysuckle Dr

City

Anchorage

State

AK

Zip Code

99502

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Davis Wright Tremaine LLP

Occupation  
Lawyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 8 / 2 0 1 0

Transaction ID: 11ai-000023896

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Alaska Democratic Party

**A.**

Full Name (Last, First, Middle Initial)

Robert Poe

Mailing Address 1233 W 11th Ave

City

Anchorage

State

AK

Zip Code

99501

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

management consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 8 / 2 0 1 0

Transaction ID: 11ai-000023897

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Gregory Razo

Mailing Address 23044 Whispering Birch Dr

City

Chugiak

State

AK

Zip Code

99567

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CIRI

Occupation

VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 8 / 2 0 1 0

Transaction ID: 11ai-000023898

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Jack Roderick

Mailing Address 1620 Hidden Lane

City

Anchorage

State

AK

Zip Code

99501

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 8 / 2 0 1 0

Transaction ID: 11ai-000023899

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Alaska Democratic Party

**A.**

Full Name (Last, First, Middle Initial)

William Sheffield

Mailing Address 3125 Susitna View Ct

City

Anchorage

State

AK

Zip Code

99517

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Port of Anchorage

Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 8 / 2 0 1 0

Transaction ID: 11ai-000023900

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Mark L. Smith

Mailing Address 11200 Jerome St

City

Anchorage

State

AK

Zip Code

99516

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pacific Fishing Assets

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 8 / 2 0 1 0

Transaction ID: 11ai-000023901

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Dana Tindall

Mailing Address 13360 Reef Pl

City

Anchorage

State

AK

Zip Code

99515

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GCI

Occupation  
Senior VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 8 / 2 0 1 0

Transaction ID: 11ai-000023902

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Alaska Democratic Party

**A.**

Full Name (Last, First, Middle Initial)

Ronald Duncan

Mailing Address 9741 Arlene

City

Anchorage

State

AK

Zip Code

99515

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GCI

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 8 / 2 0 1 0

Transaction ID: 11ai-000023887

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Karen Compton

Mailing Address 1811 Westchester Cir

City

Anchorage

State

AK

Zip Code

99517

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
homemaker, campaign worker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 8 / 2 0 1 0

Transaction ID: 11ai-000023885

Amount of Each Receipt this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)

Robert Gillam

Mailing Address 3301 C St Ste 500

City

Anchorage

State

AK

Zip Code

99503-3956

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
McKinley Capital

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 8 / 2 0 1 0

Transaction ID: 11ai-000023891

Amount of Each Receipt this Period

2000.00

**SUBTOTAL** of Receipts This Page (optional) .....

5000.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Alaska Democratic Party

**A.**

Full Name (Last, First, Middle Initial)

Mark Kroloff

Mailing Address 7101 Tree Top Cir.

City

Anchorage

State

AK

Zip Code

99507-7029

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
First Alaskan Capital Par-  
tners

Occupation

Investment Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 9 / 2 0 1 0

Transaction ID: 11ai-000023962

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Chris Cooke

Mailing Address 4625 Emerald Cir

City

Anchorage

State

AK

Zip Code

99502

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 9 / 2 0 1 0

Transaction ID: 11ai-000023963

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Laurie Gregory

Mailing Address 2020 Brandilyn St.

City

Anchorage

State

AK

Zip Code

99516-1960

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 9 / 2 0 1 0

Transaction ID: 11ai-000023964

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Alaska Democratic Party

**A.**

Full Name (Last, First, Middle Initial)

Matthew Claman

Mailing Address 3318 Illiamna Ave.

City

Anchorage

State

AK

Zip Code

99517-1119

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lane Powell

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 9 / 2 0 1 0

Transaction ID: 11ai-000023965

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Griffith C. Steiner

Mailing Address 1211 Lilac Dr

City

Anchorage

State

AK

Zip Code

99516

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation  
ophthalmologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 9 / 2 0 1 0

Transaction ID: 11ai-000023966

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Sarah Scanlan

Mailing Address 11775 Wilderness Dr

City

Anchorage

State

AK

Zip Code

99516

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rural CAP

Occupation  
Deputy Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 9 / 2 0 1 0

Transaction ID: 11ai-000023967

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Alaska Democratic Party

**A.**

Full Name (Last, First, Middle Initial)

David Jarrett

Mailing Address 5721 Kallander Dr

City

Anchorage

State

AK

Zip Code

99516

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CFO

Occupation

Old Harbor Native Corp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 9 / 2 0 1 0

Transaction ID: 11ai-000023968

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Eleanor Andrews

Mailing Address Po Box 241845

City

Anchorage

State

AK

Zip Code

99524-1845

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Andrews Group

Occupation

Contractor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 2 / 2 0 1 0

Transaction ID: 11ai-000023977

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Lowell Thomas, Jr

Mailing Address 10800 Hideaway Lake Dr

City

Anchorage

State

AK

Zip Code

99507

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 2 / 2 0 1 0

Transaction ID: 11ai-000023976

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional) .....

6000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Alaska Democratic Party

**A.**

Full Name (Last, First, Middle Initial)

Ashley Reed

Mailing Address 2504 Loussac Dr.

City

Anchorage

State

AK

Zip Code

99517-1231

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Lobbyist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 8 / 2 0 1 0

Transaction ID: 11ai-000023983

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Raymond A. Gillespie

Mailing Address 1231 W Northern Lts #456

City

Anchorage

State

AK

Zip Code

99503

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self

Occupation  
state lobbyist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 3 1 / 2 0 1 0

Transaction ID: 11ai-000024004

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional) .....

700.00

**TOTAL** This Period (last page this line number only) .....

30000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 40

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Alaska Democratic Party

**A.**

Full Name (Last, First, Middle Initial)

Great Land PAC

Mailing Address 607 14th St NW #800

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00457747

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 0 9 / 2 0 1 0

Transaction ID: 11c-000023818

Amount of Each Receipt this Period

2000.00

**SUBTOTAL** of Receipts This Page (optional) .....

2000.00

**TOTAL** This Period (last page this line number only) .....

2000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 40

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Alaska Democratic Party

**A.**

Full Name (Last, First, Middle Initial)

Democratic National Committee

Mailing Address 430 South Capitol St. SE

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 0 9 / 2 0 1 0

Transaction ID: 12-02-05117-06319

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

Democratic National Committee

Mailing Address 430 South Capitol St. SE

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7026.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 0 / 2 0 1 0

Transaction ID: 12-00-01068-01068

Amount of Each Receipt this Period

2026.00

inkind - voter file access

**SUBTOTAL** of Receipts This Page (optional) .....

7026.00

**TOTAL** This Period (last page this line number only) .....

7026.00

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)  
Alaska Democratic Party

FEC Schedule B ( Form 3X) (Revised 02/2003)

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)  
Alaska Democratic Party

Full Name (Last, First, Middle Initial)  
Leonard Lawson

**Transaction ID:** 21b-11-01410-01690  
**Date of Disbursement**

Three digital displays are shown, each with a label above it. The first display has 'M' above the digits '0' and '1'. The second display has 'D' above the digits '1' and '2'. The third display has 'Y' above the digits '2', '0', '1', and '0'.

City	State	Zip Code
Anchorage	AK	99503

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement  
staff travel

Candidate Name

Category/ Type	Count	Percentage
Category 1	10	10.0%
Category 2	20	20.0%
Category 3	30	30.0%
Category 4	40	40.0%
Category 5	50	50.0%
Category 6	60	60.0%
Category 7	70	70.0%
Category 8	80	80.0%
Category 9	90	90.0%
Category 10	100	100.0%

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

State:  District:

Full Name (Last, First, Middle Initial)  
AK Dept of Labor

**Transaction ID:** 21b-11-01416-01696  
**Date of Disbursement**

City	State	Zip Code
Juneau	AK	99811

Amount of Each Disbursement this Period

439.73

Purpose of Disbursement	payroll taxes

Candidate Name

Category/ Type	Count
Category 1	10
Category 2	20
Category 3	30
Category 4	40
Category 5	50
Category 6	60
Category 7	70
Category 8	80
Category 9	90
Category 10	100

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

Full Name (Last, First, Middle Initial)  
Angel Bunger

**Transaction ID:** 21b-11-01413-01693  
**Date of Disbursement**

City	State	Zip Code
Anchorage	AK	99501

Amount of Each Disbursement this Period

1759.62

Purpose of Disbursement	payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

**SUBTOTAL** of Disbursements This Page (optional) .....

**3199.35**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 25 / 40

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Alaska Democratic Party

<b>A.</b> Full Name (Last, First, Middle Initial) Kevin A Harun Mailing Address 804 P Street #9	<b>Transaction ID:</b> 21b-11-01414-01694 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 9 / 2 0 1 0</div> </div>
City Anchorage State AK Zip Code 99501 Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>1929.54</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Deborah L Williams Mailing Address 1142 G Street City Anchorage State AK Zip Code 99501 Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 21b-11-01415-01695 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 9 / 2 0 1 0</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2116.86</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Internal Revenue Service Mailing Address - City Ogden State UT Zip Code 84201 Purpose of Disbursement payroll taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 21b-11-01411-01691 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 0 / 2 0 1 0</div> </div> <b>Amount of Each Disbursement this Period</b> <div>392.00</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**4438.40**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Alaska Democratic Party

<b>A.</b> Full Name (Last, First, Middle Initial) Internal Revenue Service Mailing Address -	<b>Transaction ID:</b> 21b-11-01412-01692 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 0 / 2 0 1 0</div> </div>
City State Zip Code Ogden UT 84201 Purpose of Disbursement payroll taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>2626.06</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Alaska USA Federal Credit Union Mailing Address 310 E Northern Lts City State Zip Code Anchorage AK 99503 Purpose of Disbursement mortgage payment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 21b-18-00031-00031 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 0 / 2 0 1 0</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1409.29</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Democratic National Committee Mailing Address 430 South Capitol St. SE City State Zip Code Washington DC 20003 Purpose of Disbursement inkind - voter file access Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 21b-00-01069-01069 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 0 / 2 0 1 0</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2026.00</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**6061.35**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
Alaska Democratic Party

**A.**

Full Name (Last, First, Middle Initial)  
Deborah L Williams

Mailing Address 1142 G Street

City Anchorage State AK Zip Code 99501

Purpose of Disbursement  
reimbursed expenses

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 21b-11-01422-0000  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

98.33

**B.**

Full Name (Last, First, Middle Initial)  
VIDA

Mailing Address 4441 Collins Ave

City Miami Beach State FL Zip Code 33140

Purpose of Disbursement  
staff travel food

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 21b-11-01422-01704  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

32.48

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)  
Miami Dade Taxi

Mailing Address 2766 NW 62nd St

City Miami Beach State FL Zip Code

Purpose of Disbursement  
cab fare for staff

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 21b-11-01422-01705  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

18.00

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) .....

98.33

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 28 / 40

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Alaska Democratic Party

<b>A.</b> Full Name (Last, First, Middle Initial) Yellow Cabs	<b>Transaction ID:</b> 21b-11-01422-01706 <b>Date of Disbursement</b>																				
Mailing Address	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	2		2	0	1	0												
City State Zip Code Miami Beach FL	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement cab fare for staff	<table border="1"> <tr> <td>38.00</td> </tr> </table>	38.00																			
38.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Solo at Fontainebleau	<b>Transaction ID:</b> 21b-11-01422-01707 <b>Date of Disbursement</b>																				
Mailing Address	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	2		2	0	1	0												
City State Zip Code Miami Beach FL	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement staff travel food	<table border="1"> <tr> <td>9.85</td> </tr> </table>	9.85																			
9.85																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Snow City Cafe	<b>Transaction ID:</b> 21b-11-01423-01708 <b>Date of Disbursement</b>																				
Mailing Address 1034 W. Fourth	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	2		2	0	1	0												
City State Zip Code Anchorage AK 99501	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement food for event	<table border="1"> <tr> <td>1709.22</td> </tr> </table>	1709.22																			
1709.22																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

1709.22

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Alaska Democratic Party

<b>A.</b> Full Name (Last, First, Middle Initial) Kevin A Harun Mailing Address 804 P Street #9	<b>Transaction ID:</b> 21b-11-01424-01709 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 2 / 2 0 1 0</div> </div>
City Anchorage State AK Zip Code 99501 Purpose of Disbursement gift for staff person Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>160.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Starmark Insurance Mailing Address 400 Field Dr City Lake Forest State IL Zip Code 60045 Purpose of Disbursement health insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 21b-11-01425-01710 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 2 / 2 0 1 0</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1446.77</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Deborah L Williams Mailing Address 1142 G Street City Anchorage State AK Zip Code 99501 Purpose of Disbursement reimbursed expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 21b-11-01427-0000 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 2 / 2 0 1 0</div> </div> <b>Amount of Each Disbursement this Period</b> <div>490.92</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**2097.69**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
Alaska Democratic Party

<b>A.</b> Full Name (Last, First, Middle Initial) Costco Mailing Address 4125 Debarr Rd	<b>Transaction ID:</b> 21b-11-01427-01712 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 2 / 2 0 1 0</div> </div>
City Anchorage State AK Zip Code 99508 Purpose of Disbursement refreshments for event Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>490.92</div> <b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Kevin A Harun Mailing Address 804 P Street #9 City Anchorage State AK Zip Code 99501 Purpose of Disbursement reimbursed expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 21b-11-01428-0000 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 2 / 2 0 1 0</div> </div> <b>Amount of Each Disbursement this Period</b> <div>46.87</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Pizza Plaza Mailing Address 601 E Northern Lts City Anchorage State AK Zip Code 99503 Purpose of Disbursement food for meeting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 21b-11-01428-01713 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 2 / 2 0 1 0</div> </div> <b>Amount of Each Disbursement this Period</b> <div>43.40</div> <b>[MEMO ITEM]</b>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

46.87

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Alaska Democratic Party

<b>A.</b> Full Name (Last, First, Middle Initial) Carrs Mailing Address 1650 W. Northern Lts	<b>Transaction ID:</b> 21b-11-01428-01714 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 2 / 2 0 1 0</div> </div>
City Anchorage State AK Zip Code 99503 Purpose of Disbursement refreshments for meeting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>3.47</div> <b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Key Bank Mailing Address 101 W Benson City Anchorage State AK Zip Code 99503 Purpose of Disbursement credit card charges Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 21b-11-01429-0000 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 2 / 2 0 1 0</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1380.61</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Constant Contact Mailing Address 1601 Trapelo Road Suite 329 City Waltham State MA Zip Code 02451 Purpose of Disbursement web / email hosting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 21b-11-01429-01719 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 2 / 2 0 1 0</div> </div> <b>Amount of Each Disbursement this Period</b> <div>75.00</div> <b>[MEMO ITEM]</b>

**SUBTOTAL** of Disbursements This Page (optional) .....

1380.61

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Alaska Democratic Party

<b>A.</b> Full Name (Last, First, Middle Initial) Rochen Limited	<b>Transaction ID:</b> 21b-11-01429-01720 <b>Date of Disbursement</b>																				
Mailing Address PO Box 10149	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	2		2	0	1	0												
City State Zip Code Dundee, DD5 2YR	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement web / email hosting	<table border="1"> <tr> <td>17.45</td> </tr> </table>	17.45																			
17.45																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Pay Pal	<b>Transaction ID:</b> 21b-11-01429-01718 <b>Date of Disbursement</b>																				
Mailing Address 2211 North First St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	2		2	0	1	0												
City State Zip Code San Jose CA 95131	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement web / email hosting	<table border="1"> <tr> <td>20.00</td> </tr> </table>	20.00																			
20.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Eden Roc Renaissance	<b>Transaction ID:</b> 21b-11-01429-01717 <b>Date of Disbursement</b>																				
Mailing Address 4525 Collins Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	2		2	0	1	0												
City State Zip Code Miami Beach FL 33140	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement lodging for staff meeting	<table border="1"> <tr> <td>510.08</td> </tr> </table>	510.08																			
510.08																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 33 / 40

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Alaska Democratic Party

<b>A.</b> Full Name (Last, First, Middle Initial) Fontainebleau Resorts	<b>Transaction ID:</b> 21b-11-01429-01716 <b>Date of Disbursement</b>																				
Mailing Address 4441 Collins Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	2		2	0	1	0												
City State Zip Code Miami Beach FL 33140 Purpose of Disbursement Lodging for staff meeting Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">650.10</td> </tr> </table>	650.10																			
650.10																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]																				
<b>B.</b> Full Name (Last, First, Middle Initial) HMS Host	<b>Transaction ID:</b> 21b-11-01429-01715 <b>Date of Disbursement</b>																				
Mailing Address	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	2		2	0	1	0												
City State Zip Code Seattle WA Purpose of Disbursement food for staff travel Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">7.98</td> </tr> </table>	7.98																			
7.98																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]																				
<b>C.</b> Full Name (Last, First, Middle Initial) Democratic Gain	<b>Transaction ID:</b> 21b-11-01429-01721 <b>Date of Disbursement</b>																				
Mailing Address	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	2		2	0	1	0												
City State Zip Code Purpose of Disbursement membership dues Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">100.00</td> </tr> </table>	100.00																			
100.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]																				

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Alaska Democratic Party

**A.**

Full Name (Last, First, Middle Initial)  
Cornerstone Credit Services LLC

Mailing Address PO Box 6600

City Hagerstown State MD Zip Code 21740

Purpose of Disbursement  
credit card processing fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 21b-11-01432-01724

Date of Disbursement

/   /

Amount of Each Disbursement this Period

290.16

**B.**

Full Name (Last, First, Middle Initial)  
Alaska USA Federal Credit Union

Mailing Address 310 E Northern Lts

City Anchorage State AK Zip Code 99503

Purpose of Disbursement  
bank fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 21b-11-01479-01778

Date of Disbursement

/   /

Amount of Each Disbursement this Period

25.00

**SUBTOTAL** of Disbursements This Page (optional) .....

315.16

**TOTAL** This Period (last page this line number only) .....

24780.72

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 35 / 40

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Alaska Democratic Party

A.

Full Name (Last, First, Middle Initial)

Juli Barmoy

Mailing Address PO Box 21916

City  
Juneau

State  
AK

Zip Code  
99802

Purpose of Disbursement  
excess cash

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 28a-13-00219-00224

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

SUBTOTAL of Disbursements This Page (optional) .....

100.00

TOTAL This Period (last page this line number only) .....

100.00

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 36 / 40

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
Alaska Democratic Party

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
ADP Non Federal

Nature of Debt (Purpose):  
debt to non federal account

Mailing Address PO Box 231230

City State ZIP Code  
Anchorage AK 99523

Outstanding Balance Beginning This Period

10000.00

Transaction ID: 10-000001

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10000.00

1) **SUBTOTALS** This Period This Page (optional)..... ▶

10000.00

2) **TOTALS** This Period (last page this line number only)..... ▶

10000.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

10000.00

**METHOD OF ALLOCATION FOR:**

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

Alaska Democratic Party

**USE ONLY ONE SECTION, A or B****A. State and Local Party Committees****Fixed Percentage (select one)**

- \_\_\_\_\_ Presidential-Only Election Year (28% Federal)
- \_\_\_\_\_ Presidential and Senate Election Year (36% Federal)
- X  Senate-Only Election Year (21% Federal)
- \_\_\_\_\_ Non-Presidential and Non-Senate Election Year (15% Federal)

**B. Separate Segregated Funds and Nonconnected Committees****Flat Minimum Federal Percentage**If the committee will allocate using the flat minimum percentage of 50% federal funds, check ☐**or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal.....  %Nonfederal.....  %

This ratio applies to (check all that apply):

 Administrative ☐ Generic Voter Drive ☐ Public Communications Referencing Party Only ☐

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 38 / 40  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Alaska Democratic Party

**A. Full Name (Last, First, Middle Initial)**  
REM Data Services

Mailing Address

Po Box 410

City State Zip Code  
Palmer AK 99645

Purpose of Disbursement:  
bookkeeping and report work

Category/  
Type

Activity or Event Identifier:  
Admin 2009/2010

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

475.86

Date  M  M /  D  D /  Y  Y  Y  Y  
0 1 / 0 5 / 2 0 1 0

Transaction ID: 21a-11-01391-01671

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

99.93

375.93

475.86

**B. Full Name (Last, First, Middle Initial)**  
Municipal Light & Power

Mailing Address

1120 E 1st Ave

City State Zip Code  
Anchorage AK 99501

Purpose of Disbursement:  
utilities

Category/  
Type

Activity or Event Identifier:  
Admin 2009/2010

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

724.23

Date  M  M /  D  D /  Y  Y  Y  Y  
0 1 / 0 5 / 2 0 1 0

Transaction ID: 21a-11-01392-01672

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

52.16

196.21

248.37

**C. Full Name (Last, First, Middle Initial)**  
Susitna Energy Systems

Mailing Address

2507 Fairbanks St

City State Zip Code  
Anchorage AK 99503

Purpose of Disbursement:  
snow removal

Category/  
Type

Activity or Event Identifier:  
Admin 2009/2010

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

824.23

Date  M  M /  D  D /  Y  Y  Y  Y  
0 1 / 0 6 / 2 0 1 0

Transaction ID: 21a-11-01394-01674

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

21.00

79.00

100.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

173.09

651.14

824.23

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 39 / 40  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Alaska Democratic Party

**A. Full Name (Last, First, Middle Initial)**  
APC

 Mailing Address  
PO Box 2939

 City State Zip Code  
Southampton NY 11969

 Purpose of Disbursement:  
conference calls

 Category/  
Type

 Activity or Event Identifier:  
Admin 2009/2010

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

925.49

 Date M M / D D / Y Y Y Y  
0 1 / 2 2 / 2 0 1 0

Transaction ID: 21a-11-01421-01703

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.26		80.00		101.26

**B. Full Name (Last, First, Middle Initial)**  
ACS

 Mailing Address  
Po Box 196666

 City State Zip Code  
Anchorage AK 99519

 Purpose of Disbursement:  
office phones

 Category/  
Type

 Activity or Event Identifier:  
Admin 2009/2010

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1390.80

 Date M M / D D / Y Y Y Y  
0 1 / 2 2 / 2 0 1 0

Transaction ID: 21a-11-01426-01711

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
97.72		367.59		465.31

**C. Full Name (Last, First, Middle Initial)**  
AT&T Mobility

 Mailing Address  
PO Box 30459

 City State Zip Code  
Los Angeles CA 90030-0459

 Purpose of Disbursement:  
cell phone charges

 Category/  
Type

 Activity or Event Identifier:  
Admin 2009/2010

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1543.60

 Date M M / D D / Y Y Y Y  
0 1 / 2 5 / 2 0 1 0

Transaction ID: 21a-11-01444-01738

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32.09		120.71		152.80

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
151.07		568.30		719.37

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 40 / 40  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Alaska Democratic Party

**A. Full Name (Last, First, Middle Initial)**  
AT&T

 Mailing Address  
Po Box 2969

 City State Zip Code  
Omaha NE 68103

 Purpose of Disbursement:  
phone charges
Category/  
Type
 Activity or Event Identifier:  
Admin 2009/2010

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1543.99

 Date  M  M /  D  D /  Y  Y  Y  Y  
0 1 / 2 5 / 2 0 1 0

Transaction ID: 21a-11-01445-01739

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.08		0.31		0.39

**B. Full Name (Last, First, Middle Initial)**  
Municipal Light & Power

 Mailing Address  
1120 E 1st Ave

 City State Zip Code  
Anchorage AK 99501

 Purpose of Disbursement:  
utilities
Category/  
Type
 Activity or Event Identifier:  
Admin 2009/2010

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1776.10

 Date  M  M /  D  D /  Y  Y  Y  Y  
0 1 / 2 5 / 2 0 1 0

Transaction ID: 21a-11-01446-01740

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
48.74		183.37		232.11

**C. Full Name (Last, First, Middle Initial)**  
Enstar

 Mailing Address  
3600 Spenard RD

 City State Zip Code  
Anchorage AK 99503

 Purpose of Disbursement:  
utilities
Category/  
Type
 Activity or Event Identifier:  
Admin 2009/2010

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1932.18

 Date  M  M /  D  D /  Y  Y  Y  Y  
0 1 / 2 5 / 2 0 1 0

Transaction ID: 21a-11-01447-01741

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32.78		123.30		156.08

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
81.60		306.98		388.58

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
405.76		1526.42		1932.18